

APPLICANT FEEDBACK SUMMARY

2013 AmeriCorps State and National Grant Competition

Legal Applicant: Wisconsin Primary Health Care Association

Application ID: 13ES145260

Program Name: Wisconsin HealthCorps

For the purpose of enhancing our programs by improving the quality and quantity of applications to the Corporation for National and Community Service (CNCS), we are providing specific feedback regarding the strengths and weaknesses of this application. These comments are not meant to represent a comprehensive assessment; rather the analysis represents those elements that had the greatest bearing on the rating of the application. Please note that this feedback consists of summary comments from more than one reviewer. For this reason, some of the comments may seem to be inconsistent or contradictory. Comments are not representative of all of the information used in the final funding decision.

Reviewers' Summary Comments:

(+) The applicant organization clearly describes the community problems as lack of access to clinical care, excessive alcohol and tobacco consumption, unhealthy eating, and lack of exercise. All of these problems/needs will be addressed through the Healthy Futures initiative.

(+) The applicant organization provides extensive, reliably-sourced and credible documentation on the extent of the need for culturally/linguistically appropriate health education, behavioral modification, and improved/increased access to primary care services.

(+) The applicant organization clearly describes the targeted communities as economically disadvantaged and medically underserved.

(+) The applicant cites the ratio of individuals to primary care providers as being higher than the national average, and the disparity between black and white infant mortality rates as just two examples of the severity of need in the target communities.

(+) The applicant provides evidence of declining health status in the state; the state moved from being in the top ten healthiest to a lower status and the applicant explained there are reasons which are related to the existing modifiable risk factors and health behaviors including obesity, and cardiovascular and diabetes increases.

(+) The applicant's target community focus is at their host sites, which are by definition community health centers located in federally-designated, medically underserved areas; and though they serve the entire community, they frequently serve the economically disadvantaged and medically-underserved population.

(+) The applicant advocates the importance of AmeriCorps members to its successful HealthCorps program, in that each project within the host sites was started by an AmeriCorps member, and would otherwise not be happening if not for the Members they have had or are requesting.

- (+) The applicant does describe the organization's extensive accomplishments statewide and shares existing initiatives including, their service with the Winnebago County Health Department and implementation of the community health improvement plan, implementation of a community health improvement plan in Waushara County, and mentoring students in the Scenic Rivers Area Health Education Center.
- (+) The applicant clearly proposes the expected change to see by the end of the three-year grant cycle.
- (+) The applicant clearly defines the anticipated impact the interventions will have on the beneficiaries, and how the support of the AmeriCorps members will impact the communities.
- (+) The applicant includes several examples documenting previous changes as a result of the AmeriCorps investment and how additional AmeriCorps members will build off of previous success to impact communities served.
- (+) The applicant successfully describes that their use of AmeriCorps members as Community Health Workers is a more cost effective model for solving Wisconsin's health-related problems, citing the Journal of Managed Care's 2012 assertion that such workers concentrating resources and efforts in a primary care setting, prevent more costly treatment related to specialty services and inpatient care such as hospital readmissions and treatment for chronic diseases.
- (+) The applicant discusses in detail the components of their program as either evidence-based or evidence-informed, aligned with the University of Wisconsin's collection of evidence-based health interventions published as, What Works for Health.
- (-) The applicant does not specifically address why it selected this particular population to serve.